Docket No.: 115018

## APPLICATION FOR UNITED STATES PATENT **DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

RAILWAY IRUC	K SUSPENSION I	JESIGN		
described and clain	ned in the specifica	tion:		
Check one				
*a. 🔀 b. 🗀	attached hereto. filed on as	Application No and ame	nded on (if applicable).	
amended by any an	nendment referred to delete the delete the delete the duty to delete the duty to delete the delete	to above.	tents of the above-identified specificat	
Code of Federal Re Under T application(s) filed	itle 35, U.S. Code	§119, the priority benefits of th representatives or assigns within	e following foreign application(s) and none year prior to this application are h	or United States provisional lereby claimed:
U.S. Provisional Pa	atent Application N	to. 60/482,133 filed June 25, 200	3	
States of America	either (a) more tha	s) for patent or inventor's certific n one year prior to this application ovisional application(s):	eate on this invention were filed in coon, or (b) before the filing date of the	untries foreign to the United above-named foreign priority
I hereby	appoint the follo	wing as my attomeys of record s in the Patent Office:	with full power of substitution and	revocation to prosecute this
application and to	Jame	s A. Oliff, Reg. No. 27,075; Wil	liam P. Berridge, Reg. No. 30,024;	
	Kirk	M. Hudson, Reg. No. 27,562; T	homas J. Pardini, Reg. No. 30,411;	
			Robert A. Miller, Reg. No. 32,771; 5; Stephen J. Roe, Reg. No. 34,463;	
			ristopher W. Brown, Reg. No. 38,025	;
		chard E. Rice, Reg. No. 31,560;	Paul Tsou, Reg. No. 37,956; and	
		Eric D. Morehouse,	Reg. No. 38,565.	
ALL CORRESPO PLC, P.O. BOX 1	ONDENCE IN CO 19928, ALEXAND	ONNECTION WITH THIS AF RIA, VIRGINIA 22320, TELE	PPLICATION SHOULD BE SENT ' PHONE (703) 836-6400.	TO OLIFF & BERRIDGE,
own knowledge ar were made with th	re true and that all ne knowledge that itle 18 of the Unite	statements made on information willful false statements and the li	ntents of this Declaration, and that all sand belief are believed to be true; and ke so made are punishable by fine or ful false statements may jeopardize the	I further that these statements imprisonment, or both, under
Typewritten F	ull Name	•		
of First or Sol		Julius	I.	PERSHWITZ
) +++	•	I. P. Given Name T. Pe	Middle Initial	Family Name
<pre>**Inventor's Si **Date of Sign</pre>	-		6,2003	
_ Date of orga		Month	Day	Year
Residence:		Grantham	Pennsylvania	USA
		City	State or Province	Country
Citizenship:	United States o	f America		
	Post Office Add	P. O. Box 313		
	mailing address including count	ry) Grantham, Pennsylvania		
*If Box (a ) is che	cked this form ma	ay he executed only when attached	d to the specification (including claims)	).

<sup>\*</sup>If Box (a.) is checked, this form may be executed only when attached to the specification (incluse \*\*Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

## PAGE 2 OF U.S.A. DECLARATION FORM (Discard this page in a sole inventor application)

Typewritten Full Name of Second Joint Inventor (if any)		Thomas	R.	BERG	
<i>oj</i> s			Given/Name	Middle Initial	Family Name
2	**Inventor's Sign		There R	3	2001/
3	**Date of Signat	ure:	VANUARY		2004
			Month U	Day	Year
1	Residence:	War	son Woods	Missouri	USA .
			City	State or Province	Country
(	Citizenship:	United States of A	merica		
Post Office Address: (Insert complete		s: 1120 Dunwoody Drive	е		
	mailing address, including country)		Warson Woods, Misso	ouri 63122, USA	
1	Typewritten Ful	l Name			
of T	hird Joint Inventor	(if any)			Eil- Nome
			Given Name	Middle Initial	Family Name
2	**Inventor's Sign				
3	**Date of Signat	ture:		Day	Year
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	Residence:				
			City	State or Province	Country
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		Post Office Address			
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1	Typewritten Fu	ll Name			£
of F	ourth Joint Invent	or (if any)			B 1 N
			Given Name	Middle Initial	Family Name
2	**Inventor's Sig				
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	Residence:				
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	<b></b>	Post Office Address (Insert complete	S:		
		mailing address,			
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1	Typewritten Fu	II Name	-		-
	Fifth Joint Inventor				
-, -	<b>y</b>		Given Name	Middle Initial	Family Name
2	**Inventor's Sig	mature:			
3	**Date of Signa	ature:			
			Month	Day	Year
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			City	State or Province	Country
	Citizenship:		•		
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		(Insert complete	<del>-</del> -		
		mailing address,			
		including country			

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney form of the application to which it pertains.